

W8000019427

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

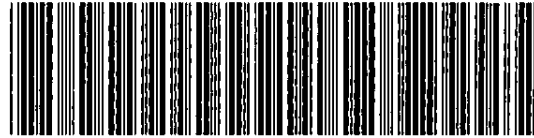
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

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T. CLINE

MAR 25 2008

EXAMINER

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Gulfcoast Administrative Solutions, LLC  
(Name of Limited Liability Company)

The enclosed Articles of Dissolution and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Aaron J. Gold, Esquire

(Name of Person)

Allen Dell, P.A.

(Firm/Company)

202 S. Rome Avenue, Suite 100

(Address)

Tampa, FL 33606

(City/State and Zip Code)

For further information concerning this matter, please call:

Aaron J. Gold, Esquire

(Name of Person)

at ( 813 ) 223-5351

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:



\$25.00 Filing Fee



30.00 Filing Fee &  
Certificate of Status



\$55.00 Filing Fee &  
Certified Copy  
(additional copy is enclosed)



\$60.00 Filing Fee,  
Certificate of Status &  
Certified Copy  
(additional copy is enclosed)

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**STREET/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

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**ARTICLES OF DISSOLUTION  
FOR  
A LIMITED LIABILITY COMPANY**

1. The name of a limited liability company is

Gulfcoast Administrative Solutions, LLC

2. The Articles of Organization were filed on 02/22/08 and assigned document number L08000019427

3. The date the dissolution was approved: 03/04/08

4. A description of occurrence that resulted in the limited liability company's dissolution pursuant to section 608.441, Florida Statutes, (copy 608.441 on back cover letter).

Pursuant to 608.441(c) upon the written consent of all of the members

5. CHECK ONE:

- ☒ All debts, obligations and liabilities of the limited liability company have been paid or discharged.  
-OR-  
☐ Adequate provision has been made for the debts, obligations and liabilities pursuant to section 608.441.

6. All remaining property and assets have been distributed among its members in accordance with the respective rights and interests.

7. CHECK ONE:

- ☒ There are no suits pending against the company in any court.  
-OR-  
☐ Adequate provision has been made for the satisfaction of any judgment, order or decree which may be entered against it in any pending suit.

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Signatures of the members having the same percentage of membership interests necessary to approve the dissolution:

Signature

Printed Name

John J. Anthony  
State Mutual Insurance Co.  
Delos H. Yancey, Jr.  
Raymond J. Biscoglia  
Douglas M. Price

John J. Anthony  
State Mutual Insurance Co.  
Delos H. Yancey, Jr.  
Raymond J. Biscoglia  
Douglas M. Price

FILING FEE: \$25.00